MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES LICENSING AND CERTIFICATION ASSISTED HOUSING

STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION **complaint # 2025-AHP-40041 and Renewal Survey**		Date Completed: 2/18/2025
Name of Facility: Pleasant Hill Road Administrator: Allison R. Vercoe Level III Residential Care Facility. Census: 5 Total Capacity: 6 License Number: RCC1973	Address: 48 Pleasant Hill Road Brunswick, ME 04011-3229	
Summary Statement of Deficiencies	**Plan of Correction**	**Completion Date**

Pleasant Hill Road, a Level III Residential Care Facility, is not in compliance with the "Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level III Residential Care Facilities, Part of 10-144, Chapter 113".

The following requirements have not been met:

7 Medications and Treatments

7.1 Use of safe and acceptable procedures. The administrator shall ensure that all persons administering medications and treatments (except residents who self-administer) use safe and acceptable methods and procedures for ordering, receiving, storing, administering, documentation, packaging, discontinuing, returning for credit and/or destroying of medications and biologicals. All employees must practice proper hand washing and aseptic techniques. A hand-washing sink shall be available for staff administering medications.

7.1.1 Residents shall receive only the medications ordered by his/her duly authorized licensed practitioner in the correct dose, at the correct time, and by the correct route of administration consistent with pharmaceutical standards. *[Class III]*

7.1 Plan of Correction:

Group home manager contacted physician on 2/13/2025 and updated these orders. Going forward, the house manager will review MARS monthly. All CRMA staff will do daily MAR checks on their shift.

Completion Date: 2/13/2025

This has not been met as evidenced by:
Based on record review and interview, the facility failed to use safe and acceptable procedures when administering and documenting
medication resulting in 1 of 2 record reviewed (Resident #2)

Finding:

On 2/11/2025, a review of Resident #2's physician orders and the Medication Administration Record (MAR) was conducted. It was identified that the order for Ammonium Lactate 12% cream, written on 12/13/2024, outlined the cream was to be applied twice daily, as needed. However, the MAR entries for both December 2024 and February 2024 stated that the Ammonium Lactate 12% cream was to be applied nightly at 8:00 PM

This finding was confirmed with the House Manager at the time of the survey and at the exit interview on 2/11/2025.

7.3 Medication Storage

7.3.2 Medications administered by the assisted living program or residential care facility shall be kept in their original containers in a locked storage cabinet. The cabinet shall be equipped with separate cubicles, plainly labeled, or with other physical separation for the storage of each resident's medications. It shall be locked when not in use and the key carried by the person on duty in charge of medication administration. *[Class III]*

Date Completed:

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This has not been met as evidenced by:

Based on observation and interviews, the facility failed to keep the medication cabinet locked when not in use and the key carried by the person on duty in charge of medication administration.

Finding:

On 02/11/2025, surveyors entered the facility and observed that the medication cabinet was unlocked and the keys hanging on the wall above the medication cabinet.

This finding was confirmed with the House Manager at time of finding and during the exit interview on 02/11/2025.

7.3.2 Medication Storage

Upon completion of licensing inspection feedback, House manager emailed a reminder to all CRMA staff on 2/11/2025 on duty to ensure that the medication cabinets are locked at all times and that the CRMA on duty will keep keys on them the key on their position at all times. A sign was also posted on 2/11/2025 on the medication cart reminding staff to keep this cabinet locked at all times.

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7.3.3 Medications/treatments administered by the assisted living program or residential care facility for external use only shall be kept separate from any medications to be taken internally. *[Class III]*

This has not been met as evidenced by:

Based on observation, record review and interview, the facility failed to ensure that the external use medication shall be kept separate from any medications to be taken internally.

Finding:

On 2/11/2025, an inspection of the facility's house stock of medical supplies was conducted. During the inspection, it was discovered that

7.3.3

All medications were separated by baskets (internal and external medications separated) on 2/11/2025. Going forward all medications for all external use only medication will be kept and stored separately from internal use medications. This will be checked on a monthly basis and the Director of Residential Services will ensure that this is checked monthly.

Completion Date: 2/11/2025

Date Completed:

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insect repellent was stored in the same container as an internal medication.

These findings were confirmed with the House Manager at the time of the survey and during the exit interview on 02/11/2025.

7.7 Expired and discontinued medications. For all medications administered by the residential care facility, medications shall be removed from use and properly destroyed after the expiration date and when discontinued, according to procedures contained in Section 7.9. They shall be taken out of service and locked separately from other medications until reordered or destroyed. *[Class III]*

This has not been met as evidenced by:

Based on observation, record review and interview, the facility failed to ensure that an expired medication was removed from use and properly destroyed.

Findings:

On 02/11/ 2025, an inspection of the facility's house stock of medical supplies was conducted. During the inspection, the following expired items were identified stored alongside active medications:

1. Triple Antibiotic Ointment, expired November 2024.
2. Colgate Toothpaste, expired August 2019.

7.7 Expired and Discontinued Medications

Expired medications were disposed upon after exit interviewing with licensing on 2/11/2025 after this meeting. Going forward all CRMA's were reminded on 2/12/2025 via email of this regulation. This will be checked on a monthly basis and the Director of Residential Services will ensure that this is checked monthly.

Completion Date: 2/11/2025

Date Completed:

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These findings were confirmed with the House Manager at the time of the survey and during the exit interview on 02/11/2025.		

Allison, administrator, LSW 3/20/2025

Date Completed: